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Supplem ntal Application Data Sheet

Application Information

Application number:: Not Yet Assigned

Application Type:: Regular

Subject Matter:: Utility

Suggested Group Art Unit:: N/A

CD-ROM or CD-R?:: None

Sequence submission?:: None

Computer Readable Form (CRF)?:: No

Title:: METHOD AND APPARATUS FOR

TESTING INTEGRATED CIRCUITS

Attorney Docket Number:: 333772000900

Request for Early Publication?:: No

Request for Non-Publication?:: No

Small Entity?:: No

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Ankan

Family Name:: PRAMANICK

City of Residence:: Santa Clara

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: 3201 Scott Boulevard

City of mailing address:: Santa Clara

State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 95054

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Initial Filing Date: February 6, 2004 Via Hand Delivery

SF-1638726

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Mark

Family Name:: ELSTON

City of Residence:: Santa Clara

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: 3201 Scott Boulevard

City of mailing address:: Santa Clara

State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 95054

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Leon
Family Name:: CHEN

City of Residence:: Santa Clara

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: 3201 Scott Boulevard

City of mailing address:: Santa Clara

State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 95054

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Robert

Family Name:: SAUER

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Attorney Docket No.: 333772000900

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City of Residence::

Santa Clara

State or Province of Residence::

CA

Country of Residence::

US

Street of mailing address::

3201 Scott Boulevard

City of mailing address::

Santa Clara

State or Province of mailing address::

CA

Postal or Zip Code of mailing address::

95054

Correspondence Information

Correspondence Customer Number::

20872

Representative Information

Representative Customer Number::

20872

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
this application	An application claiming the benefit under 35 USC 119(e)	60/449,622	2/24/2003
And also claims priority to:	An application claiming the benefit under 35 USC 119(e)	60/447,839	2/14/2003
and		10/404,002	3/31/2003
and		10/403,817	3/31/2003

Assignee Information

Assignee name::

Advantest Corporation

Street of mailing address::

3201 Scott Boulevard

City of mailing address::

Santa Clara

State or Province of mailing address::

CA

Country of mailing address::

USA

Postal or Zip Code of mailing address::

95054

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